

REPORT OF (Check one)



TYPE IN UPPER CASE
USE BLACK INK

☐ DISSOLUTION OF MARRIAGE

☐ ANNULMENT OF MARRIAGE

FLORIDA

1. COUNTY			2. DATE OF FINAL JUDGMENT		
3. DOCKET			VOL.		PAGE
4. DATE FILED AND RECORDED					
SPOUSE	5a. NAME OF SPOUSE FIRST		MIDDLE		LAST
	5b. MAIDEN NAME (if applicable)				
	6a. RESIDENCE – STATE		6b. COUNTY		6c. CITY, TOWN, OR LOCATION
SPOUSE	6d. STREET AND NUMBER				
	7a. NAME OF SPOUSE FIRST		MIDDLE		LAST
	7b. MAIDEN NAME (if applicable)				
SPOUSE	8a. RESIDENCE – STATE		8b. COUNTY		8c. CITY, TOWN, OR LOCATION
	8d. STREET AND NUMBER				
	9a. PLACE OF THIS MARRIAGE – COUNTY		9b. STATE (if not in U.S.A., name country)		9c. DATE OF THIS MARRIAGE (Month, Day, Year)
10a. LIVING CHILDREN – TOTAL NUMBER		10b. UNDER 18 YEARS OF AGE		11. PETITIONER – SPOUSE	
12a. ATTORNEY FOR PETITIONER – NAME			12b. ADDRESS (Street or R.F.D. No., City or Town, State, Zip)		
13. CLERK OF CIRCUIT COURT			BY		

DH 513, 01/2015, Florida Administrative Code Rule 65V-1.0121 Obsoletes Previous Editions

State of Florida
Department of Health
Office of Vital Statistics